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FAX TRANSMISSION**DATE:** October 5, 2007**PTO IDENTIFIER:** Application Number 10/000,461-Conf. #2303

Patent Number

Inventor: Peter WAKSMAN**MESSAGE TO:** US Patent and Trademark Office/ MS AF**FAX NUMBER:** (571) 273-8300**FROM:** LAHIVE & COCKFIELD, LLP

Kevin J. Canning/NID/cfo

PHONE: (617) 994-0732**Attorney Dkt. #:** OAQ-013RCE2**PAGES (Including Cover Sheet):** 19

CONTENTS: Fee Transmittal (1 page in duplicate)
Amendment/Reply (12 pages)
Request for Continued Examination Transmittal (1 page)
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Request for Change of Attorney Docket Number (1 page)
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Certificate of Transmission (1 page)

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PTO/SB/97 (09-04)

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Application No. (if known): 10/000,461

Attorney Docket No.: OAQ-013RCE2

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on October 5, 2007
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Kevin J. Canning

Typed or printed name of person signing Certificate

35,470

Registration Number, if applicable

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Telephone Number

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OCT 05 2007

PTO/SB/17 (10-07)

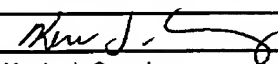
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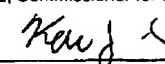
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918). FEE TRANSMITTAL For FY 2008		Complete if Known Application Number 10/000,481-Conf. #2303 Filing Date November 30, 2001 First Named Inventor Peter WAKSMAN Examiner Name J. A. Thompson Art Unit 2625 Attorney Docket No. OAQ-013RCE2	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	1,7400	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION																					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																					
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)														
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)															
Utility	310	155	510	255	210	105															
Design	210	105	100	50	130	65															
Plant	210	105	310	155	160	80															
Reissue	310	155	510	255	620	310															
Provisional	210	105	0	0	0	0															
2. EXCESS CLAIM FEES																					
Fee Description							Small Entity Fee (\$)														
Each claim over 20 (including Reissues)							50														
Each independent claim over 3 (including Reissues)							210														
Multiple dependent claims							370														
<table border="0"> <tr> <td><u>Total Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> <td><u>Multiple Dependent Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>20 =</td> <td>x</td> <td>=</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>							<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	20 =	x	=					
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>															
20 =	x	=																			
HP = highest number of total claims paid for, if greater than 20.																					
<table border="0"> <tr> <td><u>Indep. Claims</u></td> <td><u>Extra Claims</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>3 =</td> <td>x</td> <td>=</td> <td></td> </tr> </table>							<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	3 =	x	=								
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3 =	x	=																			
HP = highest number of independent claims paid for, if greater than 3.																					
3. APPLICATION SIZE FEE																					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																					
<table border="0"> <tr> <td><u>Total Sheets</u></td> <td><u>Extra Sheets</u></td> <td><u>Number of each additional 50 or fraction thereof</u></td> <td><u>Fee (\$)</u></td> <td><u>Fee Paid (\$)</u></td> </tr> <tr> <td>100 =</td> <td>/50 =</td> <td>(round up to a whole number) x</td> <td>=</td> <td></td> </tr> </table>								<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	100 =	/50 =	(round up to a whole number) x	=					
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>																	
100 =	/50 =	(round up to a whole number) x	=																		
4. OTHER FEE(S)																					
Non-English Specification, \$130 fee (no small entity discount)																					
Other (e.g., late filing surcharge): Request for continued examination (RCE) (see 37 ... 810.00																					
1801 Extension for response within third month- 1 month 1,050.00 - 120=																					
1253 previously paid. \$930																					

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	35,470
Name (Print/Type)	Kevin J. Canning	Telephone	(617) 994-0732
		Date	October 5, 2007

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Dated: October 5, 2007	Signature:  (Kevin J. Canning)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	1,7400	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
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Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
HP - 20 =	x	=				
HP = highest number of total claims paid for, if greater than 20.						
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
HP - 3 =	x	=				
HP = highest number of independent claims paid for, if greater than 3.						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge):	Request for continued examination (RCE) (see 37 ...)	810.00
	1801 Extension for response within third month- 1 month	1,050.00 - 120 =
	1253 previously paid.	\$930

SUBMITTED BY		Registration No.	35,470	Telephone	(617) 994-0732
Signature		(Attorney/Agent)		Date	October 5, 2007
Name (Print/Type)	Kevin J. Canning				

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Dated: October 5, 2007

Signature: 

(Kevin J. Canning)

Docket No.: **OAQ-013RCE2**
(PATENT)**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:
Peter Waksman

Application No.: 10/000,461

Confirmation No.: 2303

Filed: November 30, 2001

Art Unit: 2625

For: **ACCELERATING COLOR CONVERSION
USING A TEMPORARY PALETTE CACHE**

Examiner: J. A. Thompson

REQUEST FOR CHANGE OF ATTORNEY DOCKET NUMBER

MS RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

The Attorney Docket Number of the above-identified patent application has changed.
Please take notice that the Attorney Docket Number for this application should now be as follows:

OAQ-013RCE2Please reference **OAQ-013RCE2** on all future correspondence.

Dated: October 5, 2007

Respectfully submitted,

By 

Kevin J. Canning

Registration No.: 35,470

LAHIVE & COCKFIELD, LLP

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